## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS **COVER PAGE**

Please type or print in ink.

NAI	ME OF FILER (LAST)	(FIRST)		(MIDDLE)
Ki	mmel-Dagostino	Leilani		Ann
1.	Office, Agency, or Court		<u></u>	
	Agency Name			
	City of Torrance			
	Division, Board, Department, District, if applicable	Your Position		
		Candidat	e FOR COUNT	CILMENBER
	▶ If filing for multiple positions, list below or on an attachm	ent.		
	Agency:	Position		
	Agency.	POSIUOII		
2.	Jurisdiction of Office (Check at least one box)			
	☐ State	☐ Judge or (	Court Commissioner (S	Statewide Jurisdiction)
	Multi-County	County of		
	✓ City of Torrance	Other		
3.	Type of Statement (Check at least one box)			
	Annual: The period covered is January 1, 2012, throu December 31, 2012.	gh Leaving ( (Check or		
	The period covered is/	manual, till Oddii	eriod covered is Janua g office.	ary 1, 2012, through the date of
	Assuming Office: Date assumed/		eriod covered is te of leaving office.	
	Candidate: Election year 2014 and	office sought, if different than Part 1	:	
4.	Schedule Summary	► Total number of pag	os including this	2 aguar paga: 2
	Check applicable schedules or "None."	► Total Hulliber of pag	es including this	cover page.
	Schedule A-1 - Investments – schedule attached	<del></del>		ness Positions – schedule attached
	Schedule A-2 - Investments – schedule attached  Schedule B - Real Property – schedule attached	_	ncome – Gifts – sched ncome – Gifts – Trave	dule attached  I Payments - schedule attached
	Tollow De Model Popolity Conceding additional	-or-	nome – onto – mare	r r dymonio - obnodulo diduniod
	☐ None - No	reportable interests on any schedule	•	
5.	Verification	<u> </u>		
	MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	СПҮ	STATE	ZIP CODE
	3031 Torrance Boulevard JU155 USAGE	Torrance	CA	90503
	DAYTIME TELEPHONE NUMBER AVE, FA	E-MAIL ADDRESS (OP	•	
	(310 ) 793-0015	leilanikd@aol.		<u></u>
	I have used all reasonable diligence in preparing this statem herein and in any attached schedules is true and complete.			knowledge the information contained
	I certify under penalty of perjury under the laws of the	State of California that the foregoi	ng is true and corre	ct
	Date Signed February 19, 2014	Signature		

## SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION				
Name				
Leilani Ann Kimmel-Dagostino				

1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
PFS Investments	U.S. Department of Homeland Security
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
4401 Atlantic Ave, Ste 420, Long Beach, CA 90807	301 East Ocean Blvd, Long Beach, CA 90802
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Insurance and Investment Sales	US Customs and Border Protection
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Registered Representative	Supervisor
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
<b>▼</b> \$500 - \$1,000	\$500 - \$1,000\$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	☐ Loan repayment ☐ Partnership
Sale of	Sale of
(Real property, car, boat, etc.)	(Real property, car, boat, etc.)
✓ Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
<del></del>	l 1
Other(Describe)	Other (Describe)
Other(Describe)  2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	(Describe)
2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER      You are not required to report loans from commercial leader retail installment or credit card transaction, made in the	(Describe)
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